PTO/SB/17 (12-04v2) use through 7/31/2006. OMB 0651-0032

|  | -£ 1005 no nomen o   | ro convirad to     | U.S. Pater                                | of and Tradem | oved for use through<br>ark Office; U.S. DEI      | PARTMENT O     | F COMMERCE               |  |  |  |  |
|--|--|--------------------|---|---------------|---|----------------|--------------------------|--|--|--|--|
| \$7/   | respond to a collection of information unless it displays a valid OMB control number.  Complete if Known |                    |   |               |   |                |                          |  |  |  |  |
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).             |  |                    | Application Number 10/014,489-Conf. #9998 |               |   |                |                          |  |  |  |  |
| FEE TRANSMITTAL  |  |                    | Filing Date                               |               | December 14, 2001                                 |                |                          |  |  |  |  |
|  |  |                    | First Named Inventor Hung-Lu CHANG        |               |   |                |                          |  |  |  |  |
| For FY 2005  |  |                    | Examiner Name A. M. Psitos                |               |   |                |                          |  |  |  |  |
| Applicant claims small entity status. See 37 CFR 1.27  |  |                    | Art Unit                                  |               | 2653  |                |                          |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT (\$) 1,810.00  |  |                    | Attorney Docket                           | No.           | 3313-0444P  |                |                          |  |  |  |  |
| METHOD OF PAYMENT (check all that apply)   |  |                    |   |               |   |                |                          |  |  |  |  |
| x Check Credit Card Money Order None Other (please identify):  |  |                    |   |               |   |                |                          |  |  |  |  |
| x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP |  |                    |   |               |   |                |                          |  |  |  |  |
| For the above-identified de  |  |                    |   | ed to: (chec  | k all that apply)                                 |                |                          |  |  |  |  |
| Charge fee(s) indica   |  | O D.11 O O.10. 1.0 | _   |               | licated below, e                                  |                | e filing fee             |  |  |  |  |
|  |  |                    |   |               |   |                |                          |  |  |  |  |
| fee(s) under 37 CFR 1.16 and 1.17  |  |                    |   |               |   |                |                          |  |  |  |  |
| FEE CALCULATION  | EVANUATION   |                    |   |               | <del></del>                                       |                |                          |  |  |  |  |
| 1. BASIC FILING, SEARCH, AND   | FILING FEES  |                    | ARCH FEES                                 | FXAMIN        | IATION FEES                                       |                |                          |  |  |  |  |
|  | Small Entit  |                    | Small Entity                              |               | Small Entity                                      |                |                          |  |  |  |  |
|  | (\$) Fee (\$)  | <u>Fee (\$</u>     |   | Fee (\$)      | Fee (\$)  | Fees F         | Paid (\$)                |  |  |  |  |
| Utility 30   | 00 150   | 500                | 250                                       | 200           | 100   |                |                          |  |  |  |  |
| Design 20  | 00 100   | 100                | 50  | 130           | 65  |                |                          |  |  |  |  |
| Plant 20   | 00 100   | 300                | 150                                       | 160           | 80  |                |                          |  |  |  |  |
| Reissue 30   | 00 150   | 500                | 250                                       | 600           | 300   |                |                          |  |  |  |  |
| Provisional 20   | 00 100   | 0                  | 0   | 0             | 0   |                |                          |  |  |  |  |
| 2. EXCESS CLAIM FEES   |  |                    |   |               |   |                | Small Entity<br>Fee (\$) |  |  |  |  |
| Fee Description Each claim over 20 (including Re   | issues)  |                    |   |               |   | Fee (\$)<br>50 | 25                       |  |  |  |  |
| Each independent claim over 3 (in  | icluding Reissues  | s)                 |   |               |   | 200            | 100                      |  |  |  |  |
| Multiple dependent claims  |  |                    |   |               |   | 360            | 180                      |  |  |  |  |
| Total Claims Extra Claims  | Fee (\$)   | Fee F              | Paid (\$) Multiple Dependent Claims       |               |   |                |                          |  |  |  |  |
| 1220 =0  | _ x =  |                    |   | <u>Fe</u>     | <u>e (\$)                                    </u> | Fee Paid (\$)  |                          |  |  |  |  |
| Indep. Cl <u>aims</u> Extra Claims   | Fee (\$)   | Fee F              | Paid (\$)                                 |               |   | <u>.</u>       | _                        |  |  |  |  |
| 4 -4= 0  | - x =  |                    | (0)                                       |               |   |                |                          |  |  |  |  |
| 3. APPLICATION SIZE FEE  |  |                    |   |               |   |                |                          |  |  |  |  |
| If the specification and drawings  | exceed 100 shee  | ts of paper        | (excluding elect                          | ronically fil | ed sequence or                                    | computer       |                          |  |  |  |  |
| listings under 37 CFR 1.52(e) sheets or fraction thereof. Se   | i), the application  | size fee du        | e is \$250 (\$125                         | for small er  | itity) for each a                                 | dditionai 50   | ,                        |  |  |  |  |
|  | • •  |                    | dditional 50 or fra                       |               | f Fee (\$)  | Fee I          | Paid (\$)                |  |  |  |  |
| <u>Total Sheets</u> <u>Extra Sh</u><br>- 100 =   |  |                    | (round up to a wh                         |               |   | = <u>1001</u>  | 414 (4)                  |  |  |  |  |
| 4. OTHER FEE(S)  | /50  | -                  | (loand ap to a wil                        | 0.0 ,,,,,,    |   | Fees           | Paid (\$)                |  |  |  |  |
| Non-English Specification, \$130 fee (no small entity discount)  |  |                    |   |               |   |                |                          |  |  |  |  |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00                 |  |                    |   |               |   |                |                          |  |  |  |  |
| 1801 Request for Continued Examination (RCE) 790.00  |  |                    |   |               |   |                |                          |  |  |  |  |
|  |  |                    |   |               |   |                |                          |  |  |  |  |
| CUDMITTED BY   |  |                    |   |               |   |                | <del></del>              |  |  |  |  |
| SUBMITTED BY   | <del>//\-</del>  |                    | Registration No.                          | 32,334        | Telephone   | (703) 20       | 5-8000                   |  |  |  |  |
| Signature  | my 1 hum   |                    | (Attorney/Agent)                          | J2,JJ4        |   |                |                          |  |  |  |  |
| Name (Print/Type) Joe McKinney   | Mun¢y  |                    |   |               | Date  | November       | 1, ∠005                  |  |  |  |  |



MS AF REPLY UNDER 37 C.F.R. § 1.116 EXPEDITED PROCEDURE EXAMINING GROUP

| AMEN  | Docket No.<br>3313-0444P   |  |  |                          |                  |  |
|---|--|--|--|--------------------------|------------------|--|
| Application No.<br>10/014,489-Conf. #9998   |  | Filing I<br>December   | ľ  | Examiner<br>A. M. Psitos | Art Unit<br>2653 |  |
| Applicant(s): Hun   | g-Lu CHANG e   | et al.   |  |                          |                  |  |
| Invention: STRUC  | TURE OF PC   | IK-UP HEAD A   | AND ITS MET  | HOD FOR ACCES            | SING SIGNALS     |  |
| MS AF<br>Commissioner for I<br>P.O. Box 1450<br>Alexandria, VA 223<br>Transmitted here                          | 313-1450<br>with is an ame   |  |  |                          |                  |  |
| The fee has been  | calculated an  |  |  |                          |                  |  |
|   | Claims<br>Remaining<br>After<br>Amendment  | Highest<br>Number<br>Previously<br>Paid  | Number<br>Extra Claims<br>Present                                | DED<br>Rate              |                  |  |
| Total Claims  | 12   | - 20 =   | 0  | ×                        |                  |  |
| Independent<br>Claims   | 4  | - 4 =  | 0  | х                        |                  |  |
| Multiple Depend   | ent Claims (che  | eck if applicabl   | e)   |                          |                  |  |
| Other fee (pleas  | 1,020.00   |  |  |                          |                  |  |
| TOTAL ADDIT   | 1,020.00   |  |  |                          |                  |  |
| Please charge A duplicate of A duplicate of X A check in the Payment by X The Director as described X Credit ar | is hereby authors is hereby authors au | eet is enclosed  1,020.00  orm PTO-2038  norized to charalicate copy of the co | to cover is attached. ge and credit this sheet is ean processing | fees required under 3    |                  |  |